This form to be kept on site at all times of operation.

Gallatin City-County Health Department Hand Washing Plan

All food establishments must comply with and post a GCCHD Hand Washing Plan. The following GCCHD Hand Washing Plan requires that food handlers:

- 1. Have minimal bare hand food contact.
- 2. Are provided with a hand-sink with soap, fingernail brushes, and paper towels in a dispenser or a warm-air hand dryer, in the food preparation and dish washing areas:
- 3. Thoroughly wash their hands and the exposed portions of their arms with soap and warm water and dry them before starting food preparation [See Hand Washing Procedure], and also after:
 - a. Touching any soiled object, soiled surface, or soiled material, or soiled clothing;
 - b. Handling dirty dishes or equipment;
 - c. Touching or scratching any body part (ears, mouth, nose, hair, face or other parts);
 - d. Coughing, sneezing or using a handkerchief or facial tissue;
 - e. Using the restroom;
 - f. Handling raw food particularly meat and poultry;
 - g. Cleaning, removing garbage, or storing supplies;
 - h. Smoking, eating, or drinking;
 - i. Returning to the kitchen from another area;
 - i. After engaging in other activities that contaminate the hands.
- 4. Do not wipe their soiled hands on clothing or aprons;
- 5. Keep their fingernails trimmed and clean, and hands and wrists free of loose jewelry;
- 6. Have clean clothing and use hair restraints.

Hand Washing Procedure:

Food handlers shall keep their hands and exposed portions of their arms clean.

Food handlers shall clean their hands and exposed portions of their arms with a cleaning compound in an approved handwashing lavatory by vigorously rubbing together the surfaces of their lathered hands and arms for at least 20 seconds and thoroughly rinsing with clean water. Food handlers shall pay particular attention to the areas underneath the fingernails and between the fingers.

Establishment:	

By signature attached, I certify that I understand and will comply with the above cited Hand Washing Plan.

Employee Hand Washing Verification

Printed Signature	Employee Signature	Date
Printed Signature	Employee Signature	Date
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 $Licensed\ Establishments \backslash Forms \backslash Food \backslash Signed Hand Washing Plan\ Temp\ Event$